STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

OCT 25 2017

NEW HAMPSHIRE
DEPARTMENT OF STATE

| 11116 E | PLEASE P | RINT | | | | DEP | ARTMENT | OF STATE |
|---|------------------------|--------------------------------|---------------------------------|--------------------------------------|---------------------------|-----------------------------------|---------------------|----------|
| I. Name of Lobbyist | | | | | Gina | Powers, | Glenn | Wallace, |
| II. Name of lobbyist | Richa: 's partnersh | rd Parso ip, firm or co | ns, David orporation, if any | McKillop y: | | | | |
| Rath, Young | | | | | | | | |
| (Na | ime of partners | hip, firm or co | poration) | | | | | |
| One Capital | Plaza | | Concor | rd 1 | NH | | 03301 | L |
| Business Address: (S | | | (Town/City) | | State) | (Z | Cip Code) | |
| (603 226-26 | 00 | (603 ₎ | 226-2700 | e-mail | dgc@: | rathlaw. | com | |
| (603 226-26 (Telephone) | | | 226-2700 (Fax) | | | - | | |
| III. This statement or reportable expense | transactions | which are no | ot attributable to | any one client). | | | | rt for |
| | Mouth Cox | nter Haalth | anna (farmarla | / North Countr | y Hoeni | tal Coalition | <i>.</i>) | |
| | (Full Name | of Client as it | appears on the Lob | byist Registration F | orm) | tar Coarrior | <u>1,7</u> | |
| <u>OR</u> | • | | | - | | | | |
| ☐ All reportable trai | | he lobbyist (i | ncluding the lobb | yist's family), or | the lobby | ing firm listed | below whi | ch are |
| IV. Date of Report Reports cover: act | | 2017 of registration | to 3/31/17 | July 26, 2 activity from 4/1/ | | 17 | | |
| | | 25, 2017 🛭 7/1/17 to 9/30 | /17 | January 3 activity from 10/ | | | | |
| V. There have bee If this box is checked Concord, NH 03301. | l, complete ju | eceived and st this form ar | no reportable to the | transactions m: Secretary of Stat | ade since le 's Office | e the last rep e, State House, | ort. □ Room 204, | |
| VI. Check if addition | nal reports : | re attached: | | | | | | |
| If you have rece | - | | | le Addendum A- | Fees and | Expenses | | |
| ☐ If you have paid Expense Reimburser | | m or reimbur | sed expenses, you | ı must file Adden | dum B— | Report of Hon | orariums o | r |
| ☐ If you, your firm | ı, or your fam | ily has made | political contribu | tions, you must fi | le Adden | dum C- Polit | ical Contrib | outions |
| Sworn Statement/A I have read RSA 15, and complete to the | RSA 15-B, F | SA 14-C and | RSA 664 and he belief. | | rm that th | | nformation | is true |
| (Signature of lobby) | (t) | | | | - | Date) | | |
| Coldinatate of loops | i u e j | | | | , | * | | |

David G. Collins

(Print Name of lobbyist)

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| II. Name of lobbyist's partnership, firm or corporation, if any: | David M | cKillop |
|---|--|--|
| Rath Young and Pignatelli, P.C. | | |
| (Name of partnership, firm or corporation) | | |
| III. Name of Client North Country Healthcare (formerly | Date _ | October 25, 2017 |
| North Country Hospital Coalitio | n) | |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses: | relations, | or public relations service |
| a) Total of all fees received in this reporting period | a) \$ | 24,250.00 |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year) | | 0 |
| c) Total of all fees received to date (Add lines a and b) | c) \$ | 24,250.00 |
| d) Indicate the amount of any such fees that are due, but have not yet been paid | d) \$ | 0 |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to rep fees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for exampl lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported. | elient and in ay be fil aggregate spenses; (be meals person \$10 d with a vorting periode of great r than \$25 expense | if expenditures are made by ed for the lobbyist(s)/firm to total of all expenses paid by the aggregate total of all ourchased during a business that is given to the person alue of \$25.00 or less); and of greater than \$25.00 for than \$25, purchase of the person to the person of the |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported | a) \$ | 24,250.00 |
| in a), of \$25 or less. | b) \$ | 0 |
| c) Total of all itemized expenditures reported in detail in section VI. | c) \$ | 0 |

| d) Total expenses for this reporting period | d) \$ 24,250.00 |
|---|------------------------------------|
| (Add lines a, b and c) | |
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$0 |
| f) Total of all expenses year to date | f) \$24,250.00 |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged. | obbying fees during this reporting |
| Paid to: | Amount: |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| | |
| | |
| | |
| Sworn Statement/Affirmation by Lobbyist | |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief. | n that the foregoing information |
| Jayre D | October 25, 2017 |
| (Signature of lobbyist) | (Date) |
| David G. Collins | |
| (Print Name of lobbyist) | |